

# PETITION FOR DUAL MEMBERSHIP

For members from other Grand Jurisdictions permitting dual membership  
(See list on back of application)

**NOTE: Requires Certificate of Good Standing from Home Lodge for Current Year**

**PLEASE PRINT:**

Bradenton, Florida this \_\_\_\_\_ day of \_\_\_\_\_, AD \_\_\_\_\_.  
To the Master, Wardens and Members of Manatee Lodge No. 31, F&AM:  
(The Petitioner will answer the following questions)

What is your full name? \_\_\_\_\_ Phone \_\_\_\_\_

Where do you reside? \_\_\_\_\_, City \_\_\_\_\_, State \_\_\_\_\_ Zip \_\_\_\_\_

How long resided there? \_\_\_\_\_ How long resided in Florida? \_\_\_\_\_ E-mail \_\_\_\_\_

Where were you born? City \_\_\_\_\_, State \_\_\_\_\_ Date of birth? \_\_\_\_\_ Age? \_\_\_\_\_

Are you married? \_\_\_\_ Wife's name: \_\_\_\_\_ How many dependents? \_\_\_\_

What is your present occupation? \_\_\_\_\_ How long? \_\_\_\_\_

Have you ever pled guilty, or been convicted of *any* crime? \_\_\_\_ If yes, give details of when and where: \_\_\_\_\_

Have you ever been rejected in any Masonic Lodge? \_\_\_\_ If so, when and where? (explain fully) \_\_\_\_\_

Have you ever before made application for dual membership in any Masonic Lodge which application remains unacted upon? \_\_\_\_  
(if yes, explain) \_\_\_\_\_

Where did you receive the degrees of Masonry?

E.A. \_\_\_\_\_  
Lodge No. City State Date

F.C. \_\_\_\_\_  
Lodge No. City State Date

M.M. \_\_\_\_\_  
Lodge No. City State Date

Are you now a member of the above-named Lodge? \_\_\_\_ If not, give present affiliation.

\_\_\_\_\_  
Lodge No. City State Date

Are you in sound bodily health? \_\_\_\_\_

**I realize and agree that if I dimit from my Home Lodge, I will automatically become a full member of this Lodge.**

I hereby certify on my honor that all these answers are true and correct, and that I have read, understood and agree with all statements made on this application form.

SIGN YOUR FULL NAME (in ink) \_\_\_\_\_

(Go to Page 2)

**REQUIRES BACKGROUND CHECK (Form GL-601A)**

## REFERENCES

Each petitioner is required to furnish in the space provided below, the names of three (3) persons (preferably Masons, local) as references that have known him for a period of five years or more.

	NAME	STREET ADDRESS	CITY, STATE	PHONE
(1)	_____	_____	_____	_____
(2)	_____	_____	_____	_____
(3)	_____	_____	_____	_____

## RECOMMENDATIONS

(Should be different than Reverences above)

We recommend the above petitioner, based upon our belief that he is of good moral character, temperate, and industrious.

**(Must have two (2) recommendations)**

Signatures of Members of Manatee Lodge to which this petition is directed	}		
			(Print Name)
			(Print Name)

**TO BE COMPLETED AFTER THE INVESTIGATION**

I acknowledge receipt of the original background investigation obtained by the Lodge this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ and that my social security number has been redacted.

Signed: \_\_\_\_\_

**STATES PERMITTING  
DUAL MEMBERSHIP**

State	Dual
Alabama	f
Alaska	f
Albertha	f
Arizona	f
Arkansas	f
California	f
Colorado	f
Connecticut	f
Delaware	f
District of Columbia	f
Florida	f
Georgia	f
Hawaii	f
Idaho	f
Illinois	f
Indiana	f
Iowa	f
Kansas	f
Kentucky	f
Louisiana	f
Maine	f
Maryland	f
Massachusetts	f
Michigan	f
Minnesota	f
Mississippi	f
Missouri	f
Montana	f
Nebraska	f
Nevada	f
New Hampshire	f
New Jersey	f
New Mexico	f
New York	f
North Carolina	f
North Dakota	f
Nova Scotia	f
Ohio	f
Oklahoma	f
Oregon	f
Pennsylvania	f
Rhode Island	f
South Carolina	f
South Dakota	f
Tennessee	f
Texas	f
Utah	f
Vermont	f
Virginia	f
Washington	f
West Virginia	f
Wisconsin	f
Wyoming	f

\* (by dispensation only)

**PETITION FOR DUAL  
MEMBERSHIP OF:**

To Manatee Lodge #31, A&AM  
 Fee of \$ \_\_\_\_\_ paid \_\_\_\_\_ (date)  
 \_\_\_\_\_ (Secretary)

Received by the Lodge \_\_\_\_\_ (date)

Referred to Brothers:  
 \_\_\_\_\_  
 \_\_\_\_\_

Date Balloted upon \_\_\_\_\_ Result \_\_\_\_\_

**REPORT OF COMMITTEE**

We have diligently inquired into the character and qualifications of the petitioner and are satisfied that he (circle one):  
**IS** or **IS NOT** a fit person.

Therefore recommend: (circle one:)

Acceptance  
 Rejection  
 Acceptance  
 Rejection  
 Acceptance  
 Rejection  
 \_\_\_\_\_ (Committee)



# APPLICANT BACKGROUND WAIVER\*

Name: \_\_\_\_\_, \_\_\_\_\_  
(First) (Middle) (Last) (Suffix)

Current Address: \_\_\_\_\_  
(Street) (Apt/Suite)  
\_\_\_\_\_  
(City) (State) (Zip Code)

Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(Month) (Day) (Year)

Social Security No: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ \*\*

I hereby authorize Manatee Lodge No. 31, F&AM, to which I have submitted a Petition for the Three Degrees of Freemasonry, for Dual Membership, or for Affiliation, to contact any company or individual they deem appropriate to investigate my background, criminal and civil court history, character, and qualifications. I further consent to their review of any and all information obtained as a result of this investigation. I understand that any matter deemed inappropriate by Manatee Lodge, F&AM, as having possible adverse effects on the Lodge, The Most Worshipful Grand Lodge of Free and Accepted Masons of Florida (Grand Lodge), or Freemasonry as a whole is justification for the rejection of my Petition. I hereby waive my right to bring any cause of action against Manatee Lodge, the Grand Lodge of Florida, their respective Officers or Members, for defamation, invasion of privacy, or for any other reason arising from their investigation and rejection of my Petition.

I agree that if my Petition is accepted, I will abide by all the By-Laws, Rules and Regulations as set forth by Manatee Lodge No. 31, F&AM, and the Grand Lodge of Florida.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_, 20\_\_\_\_

I acknowledge receipt of the original criminal background investigation obtained by Manatee Lodge this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, and acknowledge that my Social Security number has been redacted.

Signature: \_\_\_\_\_

**\* The current cost of this report is \$15.00; payment must be made a part of the Petition and is non-refundable.** The report will be delivered to the petitioner at the conclusion of the investigation. Petitioner will sign for the report on the original Petition, located on the back below the References.

\*\* Note to Secretary: Upon execution of the receipt portion of this form by the Petitioner, you are to redact (delete the first five numbers) of the Petitioner's Social Security number.